

022704

14280 U.S. PTO

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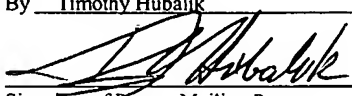
Mail Stop: Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

PATENT
Attorney Docket No.: 04236905

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Date of Deposit: February 27, 2004
I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" under 37 CFR § 1.10 on the date indicated above and is addressed to:
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By Timothy Hubalik


Signature of Person Mailing Papers

22581 U.S. PTO
10/788496

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Transmitted herewith for filing in the U.S. Patent and Trademark Office is the patent application of inventor Andrew F. Nowak of LaGrange Park, Illinois, entitled Gift and Method of Providing Same. Applicant claims small entity status in accordance with 37 CFR § 1.27.

Enclosed are:

1. ☒ 14 text pages of specification, including 22 claims, and an Abstract.
2. ☒ Drawings - 1 sheet, including Figures 1-6.
3. ☒ A Recordation Form for Assignment;
4. ☒ Executed Assignment;
5. ☒ Executed Declaration and Power of Attorney.
6. ☒ The filing fee is calculated on the basis of the claims existing in the application at 1 above.

Claims as Filed, Less Any Claims Canceled by Amendment							
	(Col. 1)	(Col. 2)	SMALL ENTITY			OTHER THAN A SMALL ENTITY	
FOR:	NO. FILED	NO. EXTRA	RATE	FEE		RATE	FEE
BASIC FEE	XXXXXXX	XXXXXXX	XXXX	\$385	or	XXXX	\$ 770.00
TOTAL CLAIMS	22 - 20 =	2	x9=	\$ 18	or	x18=	\$ -
INDEP CLAIMS	1 - 3 =	0	x43=	\$ 0	or	x86=	\$ -
[] MULTIPLE DEPENDENT CLAIM PRESENTED			+145=	\$ 0	or	+290=	\$ -
If the difference in Col. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$403		TOTAL	\$ 0.00

7. ☒ A check in the amount of \$443.00 to cover the filing fee for this application (\$403.00) and the Assignment Recordation (\$40.00). If there are any additional fees due in connection with the filing of this application, please charge the additional fees to our Deposit Account No. 13-0019.

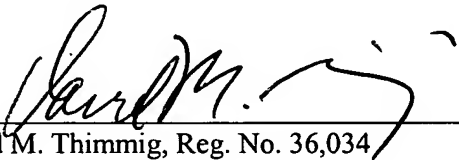
8. [X] An Information Disclosure Statement with Form 1449 and copies of the prior art references listed thereon.
9. [X] A Return Postcard for the PTO to acknowledge receipt of this filing.
10. [X] The Commissioner is hereby authorized to charge payment of required fees during the pendency of this application or credit any overpayment to deposit Account No. 13-0019. A duplicate copy of this sheet is attached.

Please address all telephone calls to David M. Thimmig at telephone number (312) 701-8593 and address all correspondence to:

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Respectfully submitted,

Dated: February 27, 2004



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